PART B - FEE(S) TRANSMITTAL Complete and Send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents JUL 1 4 2004 P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000 or Fax INSTRUCTIONS This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate of further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 28393 04/23/2004 STERNE, KESSLER, GOLDSTEIN & FOX P.L.L.C. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below. 1100 NEW YORK AVE., N.W. WASHINGTON, DC 20005 (Depositor's name) (Signature (Date) APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/077,121 02/15/2002 Simon Wall 5574 TITLE OF INVENTION: TURBOGENERATOR WITH ELECTRICAL BRAKE APPLN. TYPE SMALL ENTITY **ISSUE FEE PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$300 \$965 07/23/2004 **EXAMINER** ART UNIT **CLASS-SUBCLASS** ADDISON, KAREN B 2834 290-052000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Sterne, Kessler, Goldstein 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or 1 & Fox P.L.L.C. agents OR, alternatively, (2) the name of a single ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent © "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer attorneys or agents. If no name is listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Chatsworth, California Capstone Turbine Corporation Please check the appropriate assignee category or categories (will not be printed on the patent); individual Corporation or other private group entity 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): X Issue Fee ☐ A check in the amount of the fee(s) is enclosed. X Publication Fee Payment by credit card. Form PTO-2038 is attached. X Advance Order - # of Copies 10 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0036 (enclose an extra copy of this form). Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. (Date)

(Authorized Signature) 14JULY2004 47,415 Virgil L. Beaston 🛭 Reg. No.

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X Applicant claims small entity status. See 37 CFR 1.27

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| Application Number | 10/077,121 | | | | | |
| Filing Date | February 15, 2002 | | | | | |
| First Named Inventor | Simon Wall | | | | | |
| Examiner Name | K. Addison | | | | | |
| Art Unit | 2834 | | | | | |
| Attorney Docket No. | 2066.0010004 | | | | | |

| METHOD OF PAYMENT (check all that apply) | | | | FEE CALCULATION (continued) | | | | | | |
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| Check X Credit card Money X Other** None | | | | 3. ADDITIONAL FEES | | | | | | |
| **Charge any deficiencies or credit any overpayments in | | | Large Entity Small Entity | | | | | | | |
| Deposit P | Account: the | fees to Deposit Acct. N | <u>o. 19-003</u> 6. | Fee Code | Fee (\$) | | Fee (\$) | Fee Description | Ean Daid | |
| Account Number | | 19-0036 | | 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath | Fee Paid | |
| Denosit | Starna Kassi | lar Caldstain & Fay I | | 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or | | |
| Account Name Sterne, Kessler, Goldstein & Fox P.L.L.C. | | | 1053 | 130 | 1053 | 130 | cover sheet Non-English specification | | | |
| The Director is authorized to: (check all that apply) | | | 1812 | | 1812 | | For filing a request for ex parte reexamination | | | |
| Charge fee(s) indicated below Credit any overpayments Charge any additional fee(s) or any underpayment of fee(s) | | | | 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to | | |
| | • | ow, except for the filing | | 1005 | 4 040* | 1005 | 4 040* | Examiner action Requesting publication of SIR after | | |
| · | entified deposit | | | 1805 | 1,840* | 1805 | 1,840" | Examiner action | | |
| | | ALCULATION | | 1251 | 110 | 2251 | 55 | Extension for reply within first month | | |
| 1. BASIC FI | | | | 1252 | 420 | 2252 | 210 | Extension for reply within second month | | |
| Large Entity S | mall Entity | | | 1253 | 950 | 2253 | 475 | Extension for reply within third month | | |
| | <u>Fee Fee </u> | ee Description | Fee Paid | 1254 | 1,480 | 2254 | 740 | Extension for reply within fourth month | | |
| | 2001 385 | Utility filing fee | | 1255 | 2,010 | 2255 | 1,005 | Extension for reply within fifth month | | |
| 1002 340 | 2002 170 | Design filing fee | | 1401 | 330 | 2401 | 165 | Notice of Appeal | | |
| 1003 530 | 2003 265 | Plant filing fee | | 1402 | 330 | 2402 | 165 | Filing a brief in support of an appeal | | |
| 1004 770 | 2004 385 | Reissue filing fee | | 1403 | 290 | 2403 | 145 | Request for oral hearing | | |
| 1005 160 | 2005 80 | Provisional filing fee | | 1451 | | | | Petition to institute a public use proceeding | | |
| 1 | SI | UBTOTAL (1) (\$) | | 1452 | 110 | 2452 | | Petition to revive - unavoidable | | |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | | | | 1453 | • | 2453 | 665 | Petition to revive - unintentional | ((5 | |
| Z. EXTICA C | | Fee froi | | 1501 | • | 2501 | 665 | ,, | 665 | |
| Total Claims | | Extra Claims below | - ree Faiu | 1502 | 480 640 | 2502 2503 | 240 320 | Design issue fee Plant issue fee | | |
| Independent | = 20 - 3 | × | | 1503 1460 | 130 | 1460 | 130 | | | |
| Claims Multiple Deper | | | | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(g) | | |
| Large Entity | Small Entity | \ | | 1806 | 180 | 1806 | | Submission of Information Disclosure Stmt | | |
| Fee Fee | Fee Fee | Fee Description | | | | | 40 | Population and notant assignment nos | | |
| Code (\$) 1202 18 | Code (\$) 2202 9 | Claims in excess of 20 | | 8021 | 40 | 8021 | | property (times number of properties) | | |
| 1201 86 | 2201 43 | Independent claims in e | excess of 3 | 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR 1.129(a)) | | |
| 1203 290 | 2203 145 | Multiple dependent clai | • | 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR 1.129(b)) | | |
| 1204 86 | 2204 43 | ** Reissue independen over original patent | t claims | 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) | | |
| 1205 18 | 2205 9 | ** Reissue claims in ex- and over original pate | | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | | |
| | | | | | fee (sp | ecify) | Public | ation Fee \$300; Advance Copies \$30; | 330 | |
| SUBTOTAL (2) **or number previously paid, if greater; For Reissues, see above | | | | | iced by | Basic f | Filing F | ee Paid SUBTOTAL (3) | 995 | |
| Complete (# specially) | | | | | | | | | | |

SUBMITTED BY Registration No. Telephone Name (Print/Type) (202) 371-2600 47,415 /irgil (Attorney/Agent) Date Signature

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